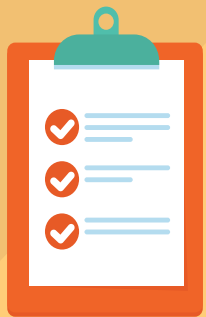


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Badge Benefits



Best practices for badging to encourage learning and produce business results



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sales, and product knowledge skills the associate has learned to date. “Learners must investigate a customer’s case, learning about the vehicle, how it’s used, and the personal details to make the right tire recommendations. They also get to practice their phone skills and deal with objections in the sales process, as well as busy and angry customers,” Hart explains. “Twenty different types of customers are randomized throughout the game.”

Captain Traction has five levels, and a set amount of time to complete each one. At the fifth level, learners must deal with five customers in the same amount of time they had for one customer at the first level.

“We knew the audience wanted more,” Hart says.

“So we added Turbo Tablet (like the J.A.R.V.I.S. computer in the movie, *Ironman*), a cheeky British female who stores all the customer information associates collect and gives feedback. Learners can earn superpowers, too, by completing customer interactions correctly. Powers include the ability to freeze time to complete interactions.”

The tire manufacturer’s gamified training is browser based, so it’s accessible on multiple types of devices. When an associate steps away, the site bookmarks the location for an easy return to play later.

The audience of 17,000 potential learners has racked up 400,000 course completions—an average of 23 courses per person since the program was gamified.

RX FOR RURAL HEALTH CARE: FRIDAY NIGHT AT THE ER

By Laura Baughman, Marketing and Customer Success Manager, Breakthrough Learning

For most city dwellers with decent health insurance and ready access to health-care providers, a visit to the emergency room (ER) may be just that—for emergencies.

But for people living in rural areas with a limited supply of health-care providers, particularly residents who are low income or at risk, the emergency room is often where they go for all their care. As a result, it’s common for rural ERs to see long wait times, increased patient walkouts, and overworked staff—all factors that may contribute to poor quality care.

Fortunately, for nearly 340,000 residents in four rural counties in North Carolina, a team of nurse educators from UNC Chapel Hill is working to change this by improving interprofessional collaborative practice (IPCP) at four different emergency rooms. The premise behind IPCP is that when nurses, physicians, and other health professionals work well as a team, they improve ER patient flow and reduce crowding, and patients receive better care.

“Based on our prior research,” explains Professor Donna Havens with the University’s School of Nursing, “we had identified through hard data that the interprofessional staff working in ERs expressed the greatest need for more help with communication and collaboration to deliver better care.”

To teach these vital skills, Havens’ team turned to a tabletop game coincidentally named Friday Night at the ER. The game simulates the challenge of managing a hospital during a typical 24-hour period. Players perform distinct functions, yet



come to realize they depend on each other.

“We bought games for each hospital and several for our team to loan out to the hospitals, and taught them how to play it,” Havens says. “We initially facilitated the games ourselves, but part of our goal was to help them sustain the positive change themselves, so we helped them learn how to facilitate.”

Each game session is followed by a structured debrief that combines reflection, dialogue, and actionable steps.

“Every time we hosted an interaction using Friday Night at the ER, it was met with excitement and curiosity, and the discussions that followed later went pretty deep,” Havens says. “It’s to the point where they see the relevance of using it beyond the emergency department, which is perfect because the real issue in providing quality care is that it has to flow from the emergency room to the other units and departments.”

Friday Night at the ER is just one part of UNC’s three-year project to improve rural health care, which is funded by the U.S. Bureau of Health Workforce, Health Resources and Services Administration, but Havens says it has helped groups and departments “walk away with new understanding of each other.”

“I know that because of our project, which includes the use of Friday Night at the ER, we have opened new awareness between the ER and Critical Care staff, and it is helping to promote the flow of patients in a timely way,” Havens says. “We are seeing improved coordination as we use it.” ■